CORPORATION

ANNUAL REPORT 2000



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State **DIVISION OF CORPORATIONS**

FILED May 02, 2000 8:00 am Secretary of State

20	700 VETER						
▼ Fllin	Read Notice and Instructions on Other Sid						
	and Address of Corporation Principal Office:			2.			
					corporation can be crianged only	by ming an amondmon.	
	DOCUMENT # F 12858		Street Address 21				
1	FAIRGROUND FARMS INC.		211 ROYAL POINCIANA WAY SUITE				
500	SOUTH AUSTRALIAN AVENUE						
	E 110		City and State 23				
WEST	PALM BEACH, FL 33401		Zip		PALM BEACH, FI. Zip Code 24 33480		
	If above address is incorrect in any way, er in item 2. Include Zip Code.	nter the correct address					
To Do E	corporated or Qualified 32/24/1980 Business in Florida	<u> </u>	59 2134077	·	□ FEI N	imber Applied For imber Not Applicable	
6. Names	and Street Addresses of Each Officer and Director (Do		tape or fluid to cover on eet Address of Each	over Incorrec	t information.)		
Title 1	Names of Officers and Directors		fficer and Director se Post Office Box Nun	nbers)	City and	State 5	
D	HARALD DUDE	_211 Roya1	Poinciana V		Palm Beach, F	<u>. </u>	
	REGISTERED AGENT INFORMATI	ON	Name 81		###1270.00	-01084008) ****150.00	
·	7. Name and Address of Current Registered A	gent					
	ARALD DUDE		Street Address 1 (Do		o NOT Use P.O. Box Number) 82		
	Royal Poinciana Way Suite Beach, FL 33480	Α	Street Address 2 (Do NOT Use P.O. Box Number) 83		P.O. Box Number) 83		
			City and State 84		FL.	Zip Code 85	
for the pur	nul to the provisions of Sections 607.034 and 607.037. Fix rpose of changing its registered office or registered agent nge was authorized by resolution duly adopted by its boa	, or both, in the State of	named corporation, inco Florida.	orporated und	er the laws of the State of Florida	, submits this statement	
	occept the appointment of registered agent. am familiar v		gations of, Section 607.3	125 F.S.			
SIGNATU	RE	<u> </u>		•	DATE		
	(Registered Agent Accepting Appointment)						
10. I certil under oath	ly that the information indicated on this annual report or s n. I further certify that I am an officer, or director of the co	supplemental annual rep poration or the receiver	ort is true and accurate a or trustee empowered to	and that my s execute this	ignature shall have the same leg- report as required by Chapter 60	al effects as if made 17, F.S.	
Signature	(Joseph Joseph J	HAPALI	DUDE, PRES	IDENT	Date 4/2	0/2000	
yped Name	e of Signing Officer or Director HARALD DUDE	Title Dresident			Telephone Number		

11. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED

president

XXX

561 833 4433